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| <p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3> | | <p>Complete if Known</p> | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | |
| | | 10/534,292-Conf. #1144 | |
| | | Filing Date | |
| | | May 9, 2005 | |
| | | First Named Inventor | |
| | | Karen Silence | |
| | | Examiner Name | |
| | | M. E. Szperka | |
| | | Art Unit | |
| | | 1644 | |
| TOTAL AMOUNT OF PAYMENT | | (\$) | 1,650.00 |
| | | Attorney Docket No. | A0848.70004US00 |

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| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | |
| <input type="checkbox"/> Deposit Account Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield & Sacks, P.C.</u> | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |

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|---|---------------------|---|-----------------|----------------------|----------------------------------|-----------------------|-----------------------|
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
| | | <u>Small Entity</u> | | <u>Small Entity</u> | | <u>Small Entity</u> | |
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | _____ |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | _____ |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | _____ |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | _____ |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | _____ |
| 2. EXCESS CLAIM FEES | | | | | | | |
| | | | | | | <u>Small Entity</u> | |
| <u>Fee Description</u> | | | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
| Each claim over 20 (including Reissues) | | | | | | 52 | 26 |
| Each independent claim over 3 (including Reissues) | | | | | | 220 | 110 |
| Multiple dependent claims | | | | | | 390 | 195 |
| <u>Total Claims</u> | | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | | |
| _____ - or HP = _____ | | x _____ | = _____ | | <u>Fee (\$)</u> | | <u>Fee Paid (\$)</u> |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| <u>Indep. Claims</u> | | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | | | |
| _____ - or HP = _____ | | x _____ | = _____ | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | | | |
| _____ - 100 = _____ | /50 = _____ | (round up to a whole number) x _____ | = _____ | | | | |
| 4. OTHER FEE(S) | | | | | | | |
| | | | | | | <u>Fees Paid (\$)</u> | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month | | | | | | 1,110.00 | |
| 1401 Notice of appeal | | | | | | 540.00 | |

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| SUBMITTED BY | | | |
| Signature | /Erik J. Spek/ | Registration No. (Attorney/Agent) | 61,065 |
| | | Telephone | 617.646.8000 |
| Name (Print/Type) | Erik J. Spek, Ph.D. | Date | November 30, 2009 |

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| Certificate of Electronic Filing Under 37 CFR 1.8 | |
| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). | |
| Dated: November 30, 2009 | Electronic Signature for Jennifer L. Cioffi: /Jennifer L. Cioffi/ |